

# APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN				JOB ADDRESS	
	EACH	NO.	FEE		
New Residential Bldgs. & Pools				1722 NN. Redding Ave.	
1 & 2-Family, Sq. Ft.	\$ .025	—	\$	LOCALITY South San Gabriel	
Multi-family Sq. Ft.	.02	—		NEAREST CROSS ST. <i>Roll Dr</i>	
Residential Swimming Pools	25.00			OWNER OR <i>Vieyra, Adelaida</i>	
				FIRM NAME	
Outlets: Rec _____ Light _____ Sw. _____				MAIL ADDRESS 1722 N. Redding Ave.	
First 20	.50			CITY South San Gabriel Tel. No. 2881411	
Total No. _____ Additional	.30			PLAN CHECK APPLICANT	
				ADDRESS	
Lighting Fixtures				CITY _____ Tel. No. _____	
First 20	.50			PERMIT APPLICANT <i>Trane HCC</i>	
Total No. _____ Additional	.30			ADDRESS 2034 N. Peck	
Fixed Appliances Not Over 1 HP				CITY <i>S. El Monte</i> Tel. No. <i>5797982</i>	
Range _____ Heater _____ D.W. _____				LICENSE OR REG. NUMBER <i>28 265094</i> Class. <i>c-10</i>	
Oven _____ Dryer _____ W.M. _____				I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.	
Top _____ FAU <input checked="" type="checkbox"/> W.H. _____			2.50	I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.	
Hood _____ Fan _____ Other _____				PERMITEE SIGNATURE <i>WB Johns AS.</i>	
Disp. _____ Room Air Cond. _____			2.50	DISTRICT NO. <i>5</i> PROCESSED BY <i>Pendergast</i>	
Power Apparatus & Large Appliances				WORKERS COMPENSATION	
Size & Type HP, KW, KVA, or KVAR				POLICY HOLDER: <i>Emp. Mutual of Wis.</i>	
Up to 1 Incl.	2.50			INFORMATION ON REVERSE SIDE	
<i>3hp</i> Over 1 to 10 Incl.	5.00		5.00	PLAN CHECK VALIDATION	
Over 10 to 50 Incl.	12.50			PERMIT VALIDATION	
Over 50 to 100 Inc.	25.00				
Over 100	40.00				
Services					
0 - 200 Amp. Under 600 V	12.50		12.50		
201 - 1000 Amp. Under 600 V	25.00				
Over 1000 Amp. or Over 600 V	50.00				
Temp. Power Pole & Appurtenances	10.00				
Sign with One Branch Circuit	10.00				
Additional Sign Branch Circuits	2.00				
Misc. Conduits & Conductors	10.00				
Other (See Complete Fee Schedule)					
PERMIT FEE (Sub-Total)			20.00		
PLAN CHECKING FEE (One-Fourth Permit Fee)					
PERMIT ISSUING FEE \$7.00			7.00		
TOTAL FEE			27.00		

INSPECTOR COPY

INSPECTION FINALED  
date: *1/23/80* By *RODRIGUEZ*

12-11-79  
*Left 10 day notice*  
*Pendergast*

2780A  
#.....2  
1..27.00  
...27.00  
0215-79

# APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS
NUMBER	FIXTURE OR ITEM	@	FEE	
	WATER CLOSET			1722 N. Redding Ave.
	BATH TUB			South San Gabriel
	SHOWER			NEAREST CROSS ST. <i>2nd St.</i>
	LAVATORY			OWNER Vieyra, Adelaida
	SINK			MAIL ADDRESS 1722 N. Redding Ave.
	DISHWASHER			CITY S. San Gabriel TEL. NO. 2881411
	CLOTHES WASHER			CONTRACTOR Trane HCC
	SWIMMING POOL RECEPTOR			ADDRESS 2034 N. Peck
	LAWN SPRINKLER SYSTEM			CITY S. El Monte TEL. NO. 5797982
	WATER HEATER			STATE LICENSE NO. 265094 LIC. CLASS c-20
1	GAS SYSTEM	1 OUTLETS	3.00	
	OUTLETS OVER 5 PER SYSTEM			
Plan check fee				
PLUMBING PERMIT ISSUING FEE \$			7.00	
TOTAL FEE			10.00	
Plan check applicant				
Name				
Address				
City		Tel. No.		
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.				
I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.				
SIGNATURE OF PERMITTEE <i>WB. Johns</i> <i>AS</i>				
DISTRICT NO. <i>5</i>		PROCESSED BY <i>Painter</i>		
INDUSTRIAL WASTE APPROVAL				

APPROVALS		DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK			
ROUGH PLUMBING			
GAS PIPING			
GAS VENT			
HOT WATER HEATER			
PLUMBING FIXTURES			
GAS TEST	<i>17#</i>	<i>1/23/80</i>	<i>Rodriguez</i>
UTILITY CO. NOTIFIED			
FINAL		<i>1/23/80</i>	<i>Rodriguez</i>

PLAN CHECK VALIDATION: *WORKER COMPENSATION*

POLICY HOLDER: *Emp. Ins. of Wis.*

POLICY NUMBER: *011900060762*

PERMIT VALIDATION: *12-11-79*  
*Left 10 day notice*  
*Rodriguez*

*2781A*  
*#.....5*  
*1...1000*  
*...1000*  
*0215-79*

INSPECTOR COPY

2027

**COUNTY OF LOS ANGELES  
DEPARTMENT OF REGIONAL PLANNING**

NORMAN MURDOCH  
Planning Director  
EDGAR T. IRVINE  
Acting Chief Deputy  
ROBERT W. CHAVE  
Deputy Director  
THEODORE B. HOWARD  
Deputy Director  
FREDERICK W. JACKSON  
Administrative Deputy

320 West Temple Street  
Los Angeles, California 90012  
Telephone: 974-6401

COMMISSIONERS  
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BETTY MALCOMB  
Secretary to the Commission

January 29, 1979

Ms. Adelaida Vieyra  
1722 Redding Ave.  
South San Gabriel, Calif. 91770

*Job Envelope*

Inspection File No. 5-2437

Dear Ms. Vieyra:

In response to a recent complaint regarding a sewing business, an inspection has been made at 1722 Redding Avenue in zone R-1, South San Gabriel Zoned District.

This inspection disclosed that the required garage has been converted into a sewing shop on the premises at the above address. These are not permitted uses in zone R-1 and are in violation of Sections 202 and 703.3, Los Angeles County Zoning Ordinance 1494.

Please consider this an order to comply with the provisions of the Zoning Ordinance within thirty (30) days after receipt of this letter.

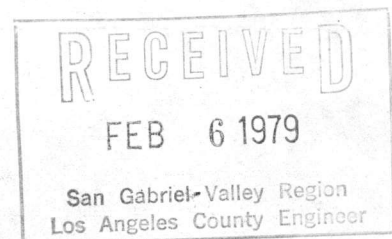
Any inquiry regarding this matter may be addressed to the Department of Regional Planning, 320 W. Temple Street, Los Angeles, Calif. 90012; Attention: Rudy Lackner, Supervisor, Zoning Enforcement, telephone 974-6453. If you desire to speak directly with the investigator, Don Singer, please call before 10:00 A. M.

Very truly yours,

DEPARTMENT OF REGIONAL PLANNING  
Norman Murdoch, Planning Director

*John Schwarze*  
John Schwarze, Division Chief  
Zoning Administration Division

JS:RL  
DS:rs



*cc: Bldg & Safety  
Temple City  
McH. 1-31-79 (5)*